

2. **Filing Fees**

Description	Fee Code	Claims	Extra	Rate	Fee
RCE Fee	2801				\$395.
Independent Claims	2201	7 - 3 =	4 x	\$100.=	\$400.
Total Claims	2202	22 - 20 =	2 x	\$25.=	\$50.

Total Filing Fees Due.....\$845.

3. **Other Fees**/ ☒ / Terminal Disclaimer, \$55.

Total Fees due, \$900.

4. **Payment of Fees**

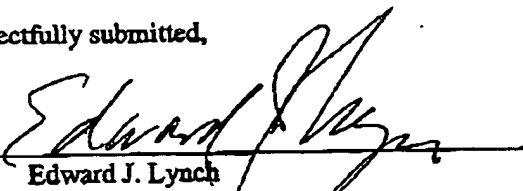
/ ☒ / The Commissioner is hereby authorized to charge any fees and to credit any overpayment of fees which may be required under 37 CFR §1.16 and §1.17, to Deposit Account No. 04-1679, referencing Atty. Docket No. R0367-01002. A duplicate copy of this sheet is enclosed for this purpose.

5. **Address all future communications to:**

Edward J. Lynch
DUANE MORRIS LLP
One Market
Spear Tower, Suite 2000
San Francisco, CA 94105

6. **Other documents enclosed herewith:**/ ☒ / Terminal Disclaimer (By Attorney)./ ☒ / Supplemental Associate Power Of Attorney./ ☒ / Form PTO-1449 and copy of 1 cited reference.

Respectfully submitted,

By: 

Edward J. Lynch
Registration No. 24,422
Attorney for Applicants

04/28/2005 TTUUT2 00000001 041679 10684124

01 FC:2801 395.00 DA
02 FC:2201 400.00 DA
03 FC:2202 50.00 DA
04 FC:2814 55.00 DA

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